

Express Mail No.: ET 1566 70843 US

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Date:

April 21, 2001

To:

Assistant Commissioner of Patents

Washington, DC 20231 Tel: 800-786-9199

Re:

Utility Patent Application

Title: Method and System for Virtual Surgery

Inventors: Chang-Hun Kim, Young-Sik Jeong, Beom-Soo Oh,

Hwa-Sung Kim

Dear Sir or Madam:

Enclosed please find:

- (1) a utility patent application
- (2) a declaration
- (3) a fee transmittal sheet
- (4) a self-stamped post card to be returned
- (5) a check of \$373 payable to the Commissioner of Patents and Trademarks

Thank you very much for your attention.

Sincerely,

Chung K Ko

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PTO/SB/17 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	3	7	3

e valid Civib control number					
Complete if Known					
Application Number					
Filing Date					
First Named Inventor	Chang-Hun Kim				
Examiner Name					
Group Art Unit					
Attorney Docket No.	1102				

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to	3. ADDITIONAL FEES			
Deposit	Large Small			
Account Number	Entity Entity Fee	T - D-14		
Deposit	Code (\$) Code (\$)	Fee Paid		
Account Name	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status See 37 CFR 1 27	139 130 139 130 Non-English specification			
2. Rayment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte reexamination			
Check Credit card Money Order Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 390 216 195 Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code <u>(\$)</u> Fee Paid	117 890 217 445 Extension for reply within third month			
101 710 201 355 Utility filing fee 355	118 1,390 218 695 Extension for reply within fourth month			
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month			
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal			
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
SUBTOTAL (1) (\$) 355	138 1,510 138 1,510 Petition to institute a public use proceeding			
	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional			
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)			
Total Claims \(\frac{1}{2} \) \(\frac{2}{3} \) \(\frac{2} \) \(\frac{2} \) \(\frac{2}{3} \) \(\frac{2}{3} \) \(143 440 243 220 Design issue fee			
Claims Multiple Dependent	144 600 244 300 Plant issue fee			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner			
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1 17(q)			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection			
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129(a)) 149 710 249 355 For each additional invention to be			
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1 129(b))			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 710 279 355 Request for Continued Examination (RCE)			
	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) (\$	Other fee (specify)			
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	0		

SUBMITTED BY					Complete (ri	f applicable)
Name (Print/Type)	Chung k	100	Registration No (Attorney/Agent)	762	Telephone	
Signature	Chan kan	Co	(Antomey/Agent)	<u>, 175</u>	Date	4/21/2001

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